

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	✓	20891	8/2
O.I.P.E. CLASSIFIER			8/15/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		10848	9/0

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final 11	5/
Original 24	14/
03	04/
1	✓
2	✓
3	0
4	✓
5	0
6	0
7	✓
8	✓
9	✓
10	✓
11	0
12	0
13	0
14	0
15	✓
16	✓
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Claim	Date
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Original 52	
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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